

DETAILED ACTION

Election/Restrictions

Claims 1-24 are withdrawn from further consideration pursuant to 37 CFR 1.142(b) as being drawn to a nonelected invention, there being no allowable generic or linking claim. Election was made **without** traverse in the reply filed on 04/21/2008.

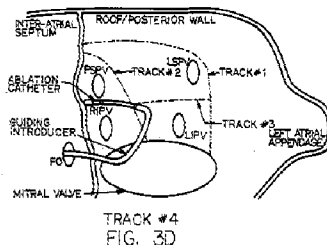
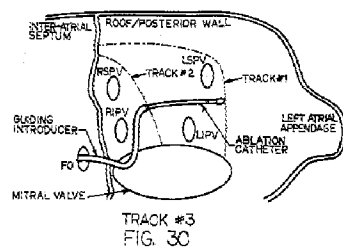
Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

Claims 25-41 are rejected under 35 U.S.C. 103(a) as being unpatentable over **Swartz et al.** (US 5,575,766, hereafter **Swartz**) in view of **Morgan et al.** (US 5,674,274, **Morgan**).

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The terms “infusion guidewire” and “leading guidewire” are interpreted in the broadest possible manner, and therefore, are considered by the examiner as simply medical tubular devices. The infusion guidewire is considered to be a hollow medical tubular device capable of accommodating the insertion of another tubular medical device within its inner walls. Moreover, the leading guidewire is considered to be a medical tubular device capable of being inserted within the inner walls of a hollow medical device such as the infusion guidewire.

Based on the above clarifications, the Swartz patent shows in figures 3C and 3D, an infusion guide wire, a leading guide wire for insertion through the infusion guide wire and having a diameter sufficiently small for passing through a lumen of the infusion guide wire, the leading guide wire having a sufficient length for passing through and protruding from a distal end of the infusion guide wire, the leading guide wire having a distal end for penetrating a wall of a right atrium of the heart; wherein the dual guide wire is sufficiently flexible for transvenously passing into the right atrium, and wherein the dual guide wire is sufficiently pushable for penetrating into the pericardial space through a wall of the right atrium without kinking.

Swartz does not disclose a locking device or the use of radiopaque markers in the guidewires. However, the use of a locking system to ensure that there is no relative movement between the infusion guidewire and the leading guidewire, and moreover, the use of radiopaque markers to facilitate locating the guidewire within the body are conventional enhancements as evidenced by the teachings of Morgan.

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Morgan expressly discloses a locking system in claim 1 and the use of radiopaque markers in column 6, lines 57-58. Accordingly, for a person of ordinary skill in the art, modifying the apparatus disclosed by Swartz, by enhancing said apparatus with a locking mechanism and markers, as taught by Morgan, would have been considered obvious in view of the proven conventionality of these structural enhancements.

Finally, concerning the issue of "sufficient pushability", the examiner would like to point out that the apparatus disclosed by Swartz has sufficient pushability for penetrating into the pericardial space as required in the claim language.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Manuel A. Mendez whose telephone number is 571-272-4962. The examiner can normally be reached on 0730-1800 hrs.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Mr. Nicholas D. Lucchesi can be reached on 571-272-4977. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

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Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/Manuel A. Mendez/

Primary Examiner, Art Unit 3763

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Art Unit 3763

MM